

Application for Outdoors Santa Barbara Visitor Center

Channel Islands National Park
Channel Islands National Marine Sanctuary
Los Padres National Forest

Date: _____

How did you hear about this position?

Name (First) (Middle) (Last) Address

ess (Street, City, State, Zip Code)

Phone number () Email address: _____

Person to notify in case of emergency: (If under 18 years of age, give name of parent/guardian)
Name Relationship?

Address (Include Street, City, State, Zip Code) Phone number
() -

The last education level I have completed is:
6 7 8 9 10 11 12 14 15 16 17 18 19 20
(Junior High School) (High School) (College)

Please describe your skills. List any further interests and hobbies _____

List any previous volunteer services, including dates and/or comments

My reason for wanting to volunteer at the visitor center:

References: Please list name and daytime phone numbers of two work references and/or one personal

reference.

Work:

Name _____ Position _____ Phone _____

Job Description _____ From: _____ to: _____

Name _____ Position _____ Phone () _____

Job Description _____ From: _____ Until: _____

Personal:

Name _____ Relationship _____ Phone () _____

Personal reference- How long have you known each other? _____

When can you be available? Starting from: _____ Until: _____

I will be available these days and state number of hours:

Sun. _____ Mon. _____ Tues. _____ Wed. _____ Thurs. _____ Fri. _____ Sat. _____

How long of a commitment will you be able to donate to the Outdoors Santa Barbara Visitor Center? _____

Print Name _____ Signature _____

Please return to: Paula Chavez-Volunteer Coordinator
OUTDOORS SANTA BARBARA VISITOR CENTER
113 Harbor Way-4th Floor
Santa Barbara, CA., 93109
(805) 884-1475

or (805) 643-0588

FAX (805) 568-1582

Office use only

Date received

Date acknowledged

Interview date

Agreement

